# FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTION

### **OMB APPROVAL**

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form......1

SEC USE ONLY					
Prefix	Serial				
DATE R	ECEIVED				



Name of Offering ( check if this is an ar	mendment and name has chan	ged, a	nd indicate change.)					
Offering of Series C Preferred Stock and	d the underlying shares of C	ommo	on Stock issuable upo	on conversion there	of.			
Filing Under (Check box(es) that apply):	☐ Rule 504	,	☐ Rule 505	Rule 506		Section 4(6)	☐ ULOE	
Type of Filing:			New Filing	I	🗷 An	nendment		
A. BASIC IDENTIFICATION DATA								
1. Enter the information requested abou	t the issuer							
Name of Issuer (Echeck if this is an amer	idment and name has changed	, and	indicate change.)					
Ruckus Wireless, Inc., formerly Video54	Technologies, Inc.							
Address of Executive Offices	(Number and S	treet, (	City, State, Zip Code)	Telephone Numb	er (Inclu	ding Area Co	de)	
883 N. Shoreline Blvd., Building A, Suite #110, Mountain View, CA 94043 (650) 854-4828								
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, Stat	te, Zip	Code)	Telephone Numb	er (Inclu	ding Area Co	de)	
Same as above.				(650) 854-4828		$\mathcal{N}$	PHOCE.com	
Brief Description of Business Video conferencing technology developm	nent						Mova.	
Type of Business Organization	ment.	_					- 4 2007	
corporation	☐ limited partnership, alread	dy for	med		□ othe	r (please spec	ify Thomson	
business trust	☐ limited partnership, to be	forme	ed				MOIAI	
Astrology February Date of Incompanies	ar One distribution	-		Year				
Actual or Estimated Date of Incorporation	or Organization:	P	August (	)2	<b>⊠</b> Actu	ıal	☐ Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)							DE DE	

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15/.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five yeas;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	E Beneficial Owner	☐ Executive Officer	<b>☑</b> Director	General and/or Managing Partner				
Full Name (Las Garg, Gaurav	t name first, if individual)								
	,	Street, City, State, Zip Code) 4-180, Menlo Park, CA 94025	;						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner				
Full Name (Las Kish, William	t name first, if individual)								
		Street, City, State, Zip Code) Blvd., Building A, Suite #110	, Mountain View, CA 94043						
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Ko, Wen	t name first, if individual)								
	idence Address (Number and blogy Fund, 6F, No. 15, Sect	Street, City, State, Zip Code) ion 2, Tiding Ave., Taipei, Tai	wan, R.O.C.						
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner	E Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Las Lo, Selina Y.	t name first, if individual)								
	idence Address (Number and reless, Inc., 883 N. Shoreline	Street, City, State, Zip Code) Blvd., Building A, Suite #110	, Mountain View, CA 94043						
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Las Orr, Dominic l	t name first, if individual)								
		Street, City, State, Zip Code) Blvd., Building A, Suite #110	, Mountain View, CA 94043						
Check Boxes that Apply:	Promoter	■ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Las Schtrom, Victor	t name first, if individual) or	•							
	idence Address (Number and reless, Inc., 883 N. Shoreline	Street, City, State, Zip Code)  Blvd., Building A, Suite #110	, Mountain View, CA 94043						
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Entities affiliat	t name first, if individual) red with Sequoia Capital X								
Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Road, 4-180, Menlo Park, CA 94025									
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
	Full Name (Last name first, if individual) Entities affiliated with W.K. Technology Fund								
Business or Res	idence Address (Number and	Street, City, State, Zip Code)							
or, No. 15, Sec	tion 2, Tiding Ave., Taipei,	i aiwan, R.O.C.							

				В	. INFORM	IATION AB	OUT OFFE	RING				
1. Has the issuer sold, or does the issuer intend to sell, to nonaccredited investors in this offering?												
2. What is the minimum investment that will be accepted from any individual?								\$	N/A			
3.	3. Does the offering permit joint ownership of a single unit?								0			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. None.												
Full	Name (Last name fir	st, if individua	al) .			<del></del>		<del></del>			<del></del>	
Busi	iness or Residence Ad	ddress (Numbe	er and Street	, City, State	, Zip Code)							
Narr	ne of Associated Brok	ter or Dealer										
State	es in Which Person L	isted Has Solid	cited or Inter	nds to Solic	it Purchaser	S						
(Che	eck "All States" or ch	eck individual	States)			• • • • • • • • • • • • • • • • • • • •						All States
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT	NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	{OK}	{OR}	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name fir	st, if individua	al)									
Busi	ness or Residence Ad	idress (Numbe	er and Street,	, City, State	e, Zip Code)							
Nam	e of Associated Brok	er or Dealer										
State	es in Which Person L	isted Has Solid	cited or Inter	nds to Solic	it Purchaser	s		<del>* * * * * * * * * * * * * * * * * * * </del>		, , , , , , , , , , , , , , , , , , , ,		
(Che	ck "All States" or ch	eck individual	States)						*******************	••••••		All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	(DC)	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
ĮΜΤ	] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	JPA]
[RI]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	(WV)	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[M]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMT		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
IRII		ISDI	ITNI	ITXI	וודו	IVTI	(VA)	IVAI	rwvi	(WI)	(WYI	IPRI

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already transaction is an exchange offering, check this box \(\Pi\) and indicate in the columns below the amounts of the		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$9,085,000.00	\$ <u>9,009,995.85</u>
	Common Preferred		
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$ 9,085,000.00	\$ 9,009,995.85
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	. \{	Number	Aggregate
	•	Investors	Dollar Amount
			of Purchases
	Accredited Investors	43	\$9,009,995.85
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	0	\$0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1.		
		Type of	Dollar Amount
		Security	Sold
	Type of Offering		
	Rule 505		\$0
	Regulation A		\$0
	Rule 504		\$0
	Total		\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees.	X	\$ 35,000.00
	Accounting Fees		\$0
	Engineering Fees.		\$0

Sales Commissions (specify finders' fees separately)

Other Expenses (Identify)\_\_\_\_\_

Total.....

35,000.00

			_		
C. OFFERING PRICE, NUMBER OF IN	VESTORS, EXPENSES AND	USE OF PROCEEDS			
<ul> <li>Enter the difference between the aggregate offering price given in response to Part C – Question 4.a. This difference is the "adjusted"</li> </ul>			\$	9,050,000.00	
5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and cl payments listed must equal the adjusted gross proceeds to the issuer set for	neck the box to the left of the e	estimate. The total of the			
payments instead music equal the adjusted gloss proceeds to the issuel set it	· ·	Payment to Officers,	P	ayment To	
		Directors, & Affiliates	_	Others	
Salaries and fees		□ s <u>o</u>	Пς	0	
Purchase of real estate				. 0	
Purchase, rental or leasing and installation of machinery and equipment	,			0	
Construction or leasing of plant buildings and facilities					
Acquisition of other businesses (including the value of securities involved in t		□ \$ <u>0</u>	LJ \$	0	
in exchange for the assets or securities of another issuer pursuant to a merger).		□ \$ <u></u>	□ s	0	
Repayment of indebtedness.		□ s <u>o</u>	□ s	0	
Working capital				9,050,000.00	
Other (specify):					
		□ \$ <u>o</u>		0	
		□ \$ <u>0</u>		0	
Column Totals		□ \$ <u>0</u>	<b>X</b> \$	9,050,000.00	
Total Payments Listed (column totals added)	<b>×</b> §9,050,000.00				
		·			
D. FEDE	RAL SIGNATURE	•			
The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.	thorized person. If this notice i mmission, upon written request	s filed under Rule 505, the of its staff, the information	following si furnished l	gnature constitutes by the issuer to any	
Issuer (Print or Type)	Signature		Date	-	
Ruckus Wireless, Inc.	#		111	105	
N. CC. (Dist. T.)	Til CO: O: Til	<b>\</b>	<u> </u>		
Name of Signer (Print or Type)	Title of Signer (Print or Type)				

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)